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Bib Data Sheet

CONFIRMATION NO. 8085

|   |   |                               |   |  |
|---|---|-------------------------------|---|--|
| <b>SERIAL NUMBER</b><br>09/934,060  | <b>FILING OR 371(c) DATE</b><br>08/21/2001<br><b>RULE</b>   | <b>CLASS</b><br>424           | <b>GROUP ART UNIT</b><br>1648   | <b>ATTORNEY DOCKET NO.</b><br>4115-144 CIP |
| <b>APPLICANTS</b><br>Anthony Louis Devico, Alexandria, VA;<br>Timothy R. Fouts, Columbia, MD;<br>Robert G. Tuskan, Baltimore, MD;   |   |                               |   |  |
| <b>** CONTINUING DATA *****</b><br>This application is a CIP of 09/684,026 10/06/2000<br>which claims benefit of 60/158,321 10/08/1999  |   |                               |   |  |
| <b>** FOREIGN APPLICATIONS *****</b>  |   |                               |   |  |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 10/02/2001</b>  |   |                               |   |  |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>VA | <b>SHEETS DRAWING</b><br>22   | <b>TOTAL CLAIMS</b><br>54                  |
|   |   |                               |   | <b>INDEPENDENT CLAIMS</b><br>1             |
| <b>ADDRESS</b><br>23448   |   |                               |   |  |
| <b>TITLE</b><br>VIRUS COAT PROTEIN/RECEPTOR CHIMERAS AND METHODS OF USE   |   |                               |   |  |
| <b>FILING FEE RECEIVED</b><br>1139  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |